AZ Medicaid Outpatient Workgroup Meeting

July 18, 2005, 10:00 – 11:00 a.m.
AHCCCS 701 E. Jefferson St. – 3rd Floor - Gold Room

Attendees:

(Based on sign-in sheets)

ADHS	CMDP, Cont.	Phoenix Health Plan
Jerri Gray	*C Renslow*	*Gregory Lucas (teleconference)*
AHCCCS	**COCHISE**	*Michell Foster (teleconference)*
Barbara Butler	*Barb Jones (teleconference)*	*Pat Lapp (teleconference)*
Deborah Burrell	*Evelyn Valdez (teleconference)*	**Pima Health System**
Cynthia Barker	*Marcia Goerdt (teleconference)*	*Marcia LeBlanc (teleconference)*
Peggy Brown	*Susan Speicher (teleconference)*	**Pinal County**
Cia Fruitman	**DES**	*Andrea Kennedy*
Jacqueline Martinez	*Major Williams*	*Willy Ross*
Mark Renkel	**EP&P**	*Susan Murphy*
Mike Upchurch	*Lori Petre*	
Nancy Upchurch	**Healthchoice AZ**	
APIPA	*Jessica Lennick*	
Sharon Zamora	*Lorie Owens*	**United Healthcare**
Care1st		*David Eder (teleconference)*
Denis Bergeron	**Maricopa Co.**	*Jack Holstrom (teleconference)*
Marlene Peek (teleconference)	*Judy Taylor*	*Alexia Cathers (teleconference)*
Ann Weeks	**MCP/Schaller**	**University Family Care**
CMDP	*Cathy Jackson-Smith*	*Kathy Steiner*
		Jean-Marie Warner (teleconference)
Vikki Duarte	*Cheryl Penny*	**Yavapai County**
Tim Newton	*Melanee Jones*	*Becky Ducharme (teleconference)*
K Taylor-Haas	*Wendy Lytle*	*Jean Willis (teleconference)*

1. Welcome (Lori Petre)

The first meeting we're having this morning is our routine, monthly Outpatient consortium meeting in order to share the status and explanations of any issues and questions that have come up. After that, we will be offering an abbreviated training overview that was given to hospital billing staff on June 28. These are two distinct meetings. We invite you all to stay for the second meeting if you are interested.

Everyone should have received a copy of the minutes of the last meeting. Please let us know if there are any corrections or clarifications.

2. **Current AHCCCS Status/Timeline/Calendar (Lori Petre)**
   As you all know, we are coming to the end of this project. But we do have a couple additions and updates to the status and timeline.

   We will probably hold the final meeting of this group in August.

   We've added some tasks related to Encounter testing, as well, which we will talk about a little later in our agenda.

   Control Group testing with the Health plans is continuing. If you have not received your results yet, you will by the end of the week. If you have questions, or need a conference to discuss these, we will arrange this. We must have both control groups successfully completed before AHCCCS will consider you ready to implement.

   We are still supporting and encouraging testing with Encounters, if for no other reason than to give you a level of comfort before going live. We will be meeting later this week with Brent to finalize the end date for testing. We believe the end of the month is still a good timeframe to wrap AHCCCS's internal Encounters testing up.

   We will be releasing the final Claims System design document later this week, and it will be posted to the website. We will not issue a final Encounters document, as we are still performing final testing. We will give you a timeline as to when to expect the final Encounters document by our next meeting.

   Concerning the AHCCCS FFS Remittance Advice, Mike and I are meeting with the Finance Group to get their blessings on the AHCCCS design and agreement to the timeline. We will track that within the timeline. Some of the HPs do need to make modifications to their remittance advice, while others already give sufficient levels of data.

   All table updates, provider updates and program components have been implemented from AHCCCS's perspective. We want to remind you that in some cases there will be ongoing changes to the tables, and which tables it is imperative you review each time there is an update. For example, there have been changes for 7/1 to the RF773 table. Please pay special attention to RF773 and RF774.

3. **Change Tracking (Lori Petre)**
   The next document in the packet is the Summary of Changes. There have been no changes since the last time we discussed this, but we did want to emphasize a few of the items.

   Please note on page 2 the values related to the exception processing for bundling (RF739) apply only to surgical bundling. This appears to be an area of some confusion.

   HP – Can you extract these tables to Excel?
   Lori Petre – I'll walk through how you locate the extracts we've done on the website. As mentioned previously, I confirmed everything is out there that is supposed to be.
   In addition to the FTP version that HPs have access to bimonthly, we've extracted most of the tables to an excel spreadsheet as an initial implementation support for the hospitals and posted them to the web. Primarily we do this for the hospitals as they don't have access to the FTP site and they need access to these rules. At this time there is not a formal plan for the ongoing maintenance of this. But we will continue to update the website over the next 6 weeks.

   On page 3, underlined at the bottom is the default cost of charge ratio for OP (SCO). It is .3192, and we want to make sure everyone has this. This was a change included in the final rule. This value will only change when rates are rebased.

On page 4, in the first paragraph we remind you that all tables are now in production and all values are q.c.'d. But again as reminder, there is the ongoing potential for future changes and additions based on source changes.

On the bottom of page 5, please note the reminder to use the final and correct peer group percentages for the hospitals. The peer group percentage applies only to those lines paid according to the fee schedule.

On page 6, there is a reminder that the peer group percentages do not apply to any procedure that classifies as a lab. Note that a few codes not traditionally classified as lab fall within this range and please be aware of that. It is important that you use the percentage as reflected on the table for each procedure code.

4. **Documentation Status (Lori Petre)**
Please review the Helpful Hints document in your packet. This was sent out after our last meeting. It was used as a key document in the training with the hospitals on 6/28. There is nothing in this document that is not reflected in Chapters 6 and 11 of the AHCCCS Fee For Service Provider (FFS) Manual, as it is just an extract of the changes to the chapters.

There are also some additional training documents we used in the training with the hospitals. We will share these with you in the next meeting.

The remaining chapter, Chapter 27, on Remittance Advice in the FFS Manual, we hope to share with you soon.

Please note, the one table listed in the Helpful Hints document is the only table in the Provider Manual at this time.

5. **Training Status (Lori Petre)**
We held Hospital Billing staff training on 6/28, which was very well attended.

We will be providing a consolidated version of this training session for interested Health Plan staff immediately after this meeting.

There is also a lot of internal AHCCCS training going on.

We've also discussed your training plans at your organizations in our individual status meetings. We encourage you to let us know if there are any materials we can share with you to facilitate these efforts.

6. **Reference Data (Lori Petre)**
In your packet we've included copies of the Excel extracts of tables RF796 and RF797 that have been posted to the web. We included these current extracts as there some values missing from the tables when they were loaded into production and we want to ensure that you were aware of the corrections. Corrections are made in bold. The current versions of both of these tables are available on the FTP server.

7. **Action Items/Open Issues (Lori Petre)**
Please continue to use the AHCCCS Outpatient Fee Schedule Workgroup email address. It is a good avenue to send your questions, comments and issues. We have very few open issues, including a couple questions open to Brent. If you send in a question to the workgroup and do not get a response within a week, please follow up, as it is reasonable to expect some form of a response within that timeframe.

8. **Status Reports and Control Group Testing (Lori Petre)**
If you are a Health Plan that has not yet implemented, we still need to receive your status reports at least every month and optimally every other week.

As we mentioned earlier, it is imperative to finish your Control Group testing. If you have not received the second set of Control Group scenarios, please let me know.

9. **Encounter Testing (Lori Petre)**

We mentioned a little about Encounter Testing earlier in the meeting. Mike and I have a meeting later this week to see where we are with this. AHCCCS requires you to do your Control Groups Claims testing, but did not specifically require any type of Encounter testing. It is, however, to your benefit to do some Encounters testing. From your perspective, you don't want to submit O/P Encounters and get a lot of pends. We encourage you to perform some Encounters testing. You can use the control group claims, or enter some new scenarios of your own.

10. **Final PMMIS Design Documentation (Lori Petre)**

As mentioned earlier, the final Claims Document will be posted later this week to the web. We will also email this to all of you. We want to make sure you do get the final document.

Also included in your packet is a copy of an email that went out to the hospitals (a version was also sent to the Health Plans) regarding the 7/1 implementation status for each Health Plan.

11. **Future meetings/Ongoing Communications**

We will likely be offering a teleconference version at a future date, of the hospital training overview scheduled after this meeting for those of you who are interested. We will email the times and phone number once the date has been set.

August meeting date and time for this group is TBD and will be communicated via email.

Thank you!